## LOCAL BANKRUPTCY FORM NO. 5 IN THE UNITED STATES BANKRUPTCY COURT WESTERN DISTRICT OF PENNSYLVANIA

IN RE		)	
Christopher A.	Mangum, Debtor	)	Case No. 17-22116 Chapter 7 Docket No.
Christopher A.	Mangum, Movant	)	
	Vs.	)	
No Respondent	ts	)	
	AMENDME	NT COV	ER SHEET
Amendment(s) transmitted her	0 1	list(s), scl	hedule(s), or statement(s) are
reflect the fact Company. He	that he was terminated fro	m his em	e Debtor is amending Schedule I to ployment with Peoples Natural Gas ation which was denied and therefore
S	Summary of Schedules Schedule A – Real Propert Schedule B - Personal Pro Schedule C – Property Cla chedule D – Creditors hold Check one: Creditor(s) ac NO credito Creditor(s) Schedule E – Creditors Ho Check one: Creditor(s) NO credito Creditor(s) Creditor(s) Creditor(s) Creditor(s) NO credito Creditor(s)	by operty imed as Eding Secur dded or(s) added olding Un added or(s) added	red Claims} d secured Priority Claims
	Creditor(s) NO credito		d

Creditor(s) delete	ed
Schedule G – Executory Contra	acts and Unexpired Leases
Check one:	-
Creditor(s) added	d
NO creditor(s) a	added
Creditor(s) delete	ed
Schedule H – Codebtors	
_X_ Schedule I - Current Income	of Individual Debtor(s)
Schedule J- Current Expendit	ures of Individual Debtor(s)
Statement of Financial Affairs	
Chapter 7 Individual Debtor's S	Statement of Intention
Chapter 11 List of Equity Secur	rity Holders
Chapter 11 List of Creditors Ho	olding 20 Largest Unsecured Claims
Disclosure of Compensation of	Attorney for Debtor
Other:	
NOTICE OF AMENDMENT(S) TO AFFE Pursuant to Fed.R.Bankr.P. 1009(a) and Local filing of the amendment(s) checked above has the trustee in this case and to entities affected Rosemary Crawford, Trustee	Rule 1009-1, I certify that notice of the been given this date to the U.S. Trustee
PO Box 355	
Allison Park, PA 15101	
Date: September 22, 2017	/s/ Kenneth Steidl Kenneth Steidl, Esquire Attorney for the Debtor
	CTEIDI & CTEINDEDC

STEIDL & STEINBERG Suite 2830 – Gulf Tower 707 Grant Street Pittsburgh, PA 15219 (412) 391-8000 PA I.D. No. 34965 Ken.Steidl@steidl-steinberg.com

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Fill	in this information to identify your o	case:							
	, ,	r A. Mangum							
	otor 2 use, if filing)				_				
Uni	ted States Bankruptcy Court for the	e: WESTERN DISTRICT	OF PENNSYLVANIA						
Cas	se number 17-22116					Check if this is:			
(If kn	lown)					An amende	ed filing		
							ent showing postpetition chapte as of the following date:	∍r	
<u>O</u> 1	fficial Form 106l					MM / DD/ Y	YYY		
So	chedule I: Your Inc	ome					12	2/1	
spoi atta	plying correct information. If you use. If you are separated and you has separate sheet to this form.  Describe Employment	ur spouse is not filing wi On the top of any addition	ith you, do not include	inforr	natio	on about your spo	ouse. If more space is needed		
1.	Fill in your employment information.		Debtor 1			Debtor 2	2 or non-filing spouse		
	If you have more than one job,	, Employment status	☐ Employed			☐ Emple	☐ Employed		
attach a separate page with information about additional	Employment status	■ Not employed			☐ Not e	☐ Not employed			
	employers.	Occupation							
	Include part-time, seasonal, or self-employed work.	Employer's name	-						
	Occupation may include student or homemaker, if it applies.	Employer's address							
		How long employed the	here?						
Par	t 2: Give Details About Mo	nthly Income							
	mate monthly income as of the cuse unless you are separated.	date you file this form. If y	you have nothing to rep	ort for	any I	ine, write \$0 in the	space. Include your non-filing		
	u or your non-filing spouse have me space, attach a separate sheet to		ombine the information f	for all e	mplo	yers for that perso	on on the lines below. If you ne	ed	
						For Debtor 1	For Debtor 2 or non-filing spouse		
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	0.00	\$ <b>N/A</b> _		
3.	Estimate and list monthly over	time pay.		3.	+\$	0.00	+\$ <b>N/A</b>		

Calculate gross Income. Add line 2 + line 3.

0.00

N/A

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here  coll deductions:  Idedicare, and Social Security deductions atory contributions for retirement plans tary contributions for retirement plans red repayments of retirement fund loans ance stic support obligations dues deductions. Specify:  croll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. tal monthly take-home pay. Subtract line 6 from line 4.  cr income regularly received: come from rental property and from operating a business, ssion, or farm a statement for each property and business showing gross	4. 5a. 5b. 5c. 5d. 5e. 5f. 5g. 6.	\$	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	non-   \$	Debtor filing s	N/A N/A N/A N/A N/A N/A N/A N/A N/A	
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come from rental property and from operating a business, ssion, or farm			0.00	\$		N/A	
ts, ordinary and necessary business expenses, and the total ly net income.	8a.	\$	0.00	¢		N/A	
st and dividends	8b.	\$—	0.00	<b>\$</b> —		N/A	
y support payments that you, a non-filing spouse, or a dependentify receive a alimony, spousal support, child support, maintenance, divorcement, and property settlement.		* \$	0.00	\$		N/A	
ployment compensation	8d.	\$	0.00	<u>\$</u> —		N/A	
Security	8e.	\$	0.00	\$		N/A	
government assistance that you regularly receive e cash assistance and the value (if known) of any non-cash assistance to receive, such as food stamps (benefits under the Supplemental on Assistance Program) or housing subsidies. y: on or retirement income	8f.	\$ 	0.00	\$ 		N/A	
monthly income. Specify:	8g. 8h.+	· —	0.00	·		N/A N/A	
monthly moonie. opening.	011.1	Ψ	0.00	'		IVA	
r income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$		N/A	
onthly income. Add line 7 + line 9.	10. \$		0.00 + \$		N/A	= \$	0.00
es in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	ΙΟ.   Ψ				14/7		0.00
er regular contributions to the expenses that you list in Schedule ibutions from an unmarried partner, members of your household, you or relatives.	r depen			•			0.00
					12.	\$	0.00
	.2						
1	ibutions from an unmarried partner, members of your household, you or relatives. e any amounts already included in lines 2-10 or amounts that are not bunt in the last column of line 10 to the amount in line 11. The resount on the Summary of Schedules and Statistical Summary of Certain	ibutions from an unmarried partner, members of your household, your dependence or relatives.  e any amounts already included in lines 2-10 or amounts that are not availabeen the control of the last column of line 10 to the amount in line 11. The result is the	ibutions from an unmarried partner, members of your household, your dependents, your relatives.  e any amounts already included in lines 2-10 or amounts that are not available to part of the last column of line 10 to the amount in line 11. The result is the combinant on the Summary of Schedules and Statistical Summary of Certain Liabilities and	ibutions from an unmarried partner, members of your household, your dependents, your roommates or relatives.  e any amounts already included in lines 2-10 or amounts that are not available to pay expenses list ount in the last column of line 10 to the amount in line 11. The result is the combined monthly into on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data	ibutions from an unmarried partner, members of your household, your dependents, your roommates, and or relatives.  e any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Sometime to the second of the seco	ibutions from an unmarried partner, members of your household, your dependents, your roommates, and or relatives.  e any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedul 11.  bunt in the last column of line 10 to the amount in line 11. The result is the combined monthly income. In the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it	ibutions from an unmarried partner, members of your household, your dependents, your roommates, and or relatives.  e any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.  11. +\$  bunt in the last column of line 10 to the amount in line 11. The result is the combined monthly income.  iount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it  12. Combined monthly in